

## **Application Data Sheet**

**Application Information** 

APPLICATION NUMBER:: 10/785,042

FILING DATE:: February 25, 2004

APPLICATION TYPE:: REGULAR

SUBJECT MATTER:: UTILITY

SUGGESTED CLASSIFICATION::

SUGGESTED GROUP ART UNIT:: 1655

CD-ROM OR CD-R?::

NUMBER OF CD DISKS::

NUMBER OF COPIES OF CDS::

**SEQUENCE SUBMISSION?::** 

COMPUTER READABLE FORM (CRF)?:: NO

NUMBER OF COPIES OF CRF::

TITLE:: METHOD OF TREATING OR

INHIBITING OBESITY

ATTORNEY DOCKET NUMBER:: 029300.49991D2

REQUEST FOR EARLY PUBLICATION:: NO

REQUEST FOR NON PUBLICATION:: NO

SUGGESTED DRAWING FIGURE:: N/A

TOTAL DRAWING SHEETS:: 0

SMALL ENTITY:: NO

PETITION INCLUDED?:: NO

**PETITION TYPE::** 

LICENSED US GOVT. AGENCY::

**CONTRACT OR GRANT NUMBERS::** 

SECRECY ORDER IN PARENT APPL.?:: NO

APPLICANT INFORMATION

APPLICANT AUTHORITY TYPE:: INVENTOR

PRIMARY CITIZENSHIP:: GERMANY

STATUS:: FULL CAPACITY

GIVEN NAME:: JOHANNES

FAMILY NAME:: HEBEBRAND

CITY OF RESIDENCE:: MARBURG/LAHN

COUNTRY OF RESIDENCE:: GERMANY

STREET OF MAILING ADDRESS:: FONTANE STRASSE 4

CITY OF MAILING ADDRESS:: MARBURG/LAHN

COUNTRY OF MAILING ADDRESS:: GERMANY

POSTAL OR ZIP CODE OF MAILING ADDRESS:: 35039

APPLICANT AUTHORITY TYPE:: INVENTOR

PRIMARY CITIZENSHIP:: GERMANY

STATUS:: FULL CAPACITY

GIVEN NAME:: JOCHEN

FAMILY NAME:: ANTEL

CITY OF RESIDENCE:: BAD MUENDER

COUNTRY OF RESIDENCE:: GERMANY

STREET OF MAILING ADDRESS:: LAUENAUERSTR. 63

CITY OF MAILING ADDRESS:: BAD MUENDER

COUNTRY OF MAILING ADDRESS:: GERMANY

POSTAL OR ZIP CODE OF MAILING ADDRESS:: 31848

APPLICANT AUTHORITY TYPE:: INVENTOR

PRIMARY CITIZENSHIP:: GERMANY

STATUS:: FULL CAPACITY

GIVEN NAME:: ULF

FAMILY NAME:: PREUSCHOFF

CITY OF RESIDENCE:: LEHRTE/AHLTEN

COUNTRY OF RESIDENCE:: GERMANY

STREET OF MAILING ADDRESS:: AM MUEHLENBERG 21

CITY OF MAILING ADDRESS:: LEHRTE/AHLTEN

COUNTRY OF MAILING ADDRESS:: GERMANY

POSTAL OR ZIP CODE OF MAILING ADDRESS:: 31275

APPLICANT AUTHORITY TYPE:: INVENTOR

PRIMARY CITIZENSHIP:: GERMANY

STATUS:: FULL CAPACITY

GIVEN NAME:: SAMUEL FAMILY NAME:: DAVID

CITY OF RESIDENCE:: HANNOVER

COUNTRY OF RESIDENCE:: GERMANY

STREET OF MAILING ADDRESS:: GOLLSTRASSE 9

CITY OF MAILING ADDRESS:: HANNOVER
COUNTRY OF MAILING ADDRESS:: GERMANY

POSTAL OR ZIP CODE OF MAILING ADDRESS:: 30559

APPLICANT AUTHORITY TYPE:: INVENTOR PRIMARY CITIZENSHIP:: GERMANY

STATUS:: FULL CAPACITY

GIVEN NAME:: HOLGER

FAMILY NAME:: SANN

CITY OF RESIDENCE:: HANNOVER

COUNTRY OF RESIDENCE:: GERMANY

STREET OF MAILING ADDRESS:: KAMPSTRASSE 52

CITY OF MAILING ADDRESS:: HANNOVER
COUNTRY OF MAILING ADDRESS:: GERMANY

POSTAL OR ZIP CODE OF MAILING ADDRESS:: 30629

APPLICANT AUTHORITY TYPE:: INVENTOR

PRIMARY CITIZENSHIP:: GERMANY

STATUS:: FULL CAPACITY

GIVEN NAME:: MICHAEL

FAMILY NAME:: WESKE

CITY OF RESIDENCE:: BURGDORF

COUNTRY OF RESIDENCE:: GERMANY

STREET OF MAILING ADDRESS:: PAHLBERG 7

CITY OF MAILING ADDRESS:: BURGDORF

COUNTRY OF MAILING ADDRESS:: GERMANY

POSTAL OR ZIP CODE OF MAILING ADDRESS:: 31303

### **CORRESPONDENCE INFORMATION**

**CORRESPONDENCE CUSTOMER NUMBER:: 23911** 

### REPRESENTATIVE INFORMATION

REPRESENTATIVE CUSTOMER NUMBER:: 23911

### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/907,440	July 18, 2001
09/907,440	An application claiming the benefit under 35 USC 119(e)	60/219,672	July 21, 2000

### FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::	Priority Claimed::
DE	100 35 227.8	July 20, 2000	YES

# **ASSIGNMENT INFORMATION**

**ASSIGNEE NAME::** 

**SOLVAY PHARMACEUTICALS GMBH**